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Atty Docket No. 018158-011610US

PTO FAX NO.: 571-273-8300

ATTENTION: Examiner Michael A. LYONS

Group Art Unit 2877

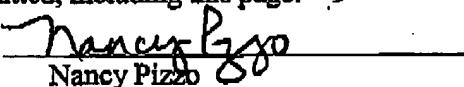
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FOR THE PERSONAL ATTENTION OF
EXAMINER Michael A. LYONS**

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of JOHN K. SHIMMICK, Application No. 10/601,119, filed June 19, 2003 for INTEGRATED SCANNING AND OCULAR TOMOGRAPHY SYSTEM AND METHOD are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Number of pages being transmitted, including this page: 9

Dated: 11 July 2005


Nancy Pizzo

Documents Attached

1. SB/21 - Transmittal Form
2. Response to Restriction Requirement and Preliminary Amendment

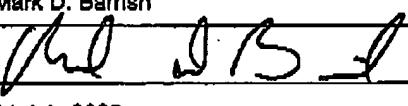
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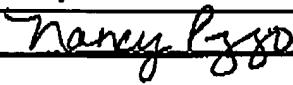
TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
Tele: 650-326-2400
Fax: 650-326-2422

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60534797 v1

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/601,119
		Filing Date	June 19, 2003
		First Named Inventor	SHIMMICK, JOHN K.
		Art Unit	2877
		Examiner Name	Michael A. LYONS
Total Number of Pages in This Submission	9	Attorney Docket Number	018158-011610US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Townsend and Townsend and Crew LLP Mark D. Barrish	
Signature		
Date	11 July 2005	

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			11 July 2005

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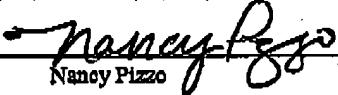
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TOWNSEND and TOWNSEND and CREW LLP

By: 

Nancy Pizzo

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

JOHN K. SHIMMICK

Application No.: 10/601,119

Filed: June 19, 2003

For: INTEGRATED SCANNING AND
OCULAR TOMOGRAPHY SYSTEM
AND METHOD

Confirmation No. 6002

Examiner: Michael A. LYONS

T.C./Art Unit: 2877

**RESPONSE TO RESTRICTION
REQUIREMENT AND
PRELIMINARY AMENDMENT**

Mailstop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Restriction Requirement mailed on June 29, 2005, Applicant elect to prosecute claims 1-10, 15-23, and 27-30, drawn to a method and apparatus for measuring the thickness of and treating a tissue. Applicants elect to prosecute these claims without traverse.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.